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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/926,367	06/13/2002	Christian Marzolin	215140US0PCT	9256
22850	7590	05/15/2009		
OBLON, SPIVAK, MCCLELLAND MAIER & NEUSTADT, P.C. 1940 DUKE STREET ALEXANDRIA, VA 22314				
EXAMINER				
CHEVALIER, ALICIA ANN				
ART UNIT		PAPER NUMBER		
1794				
NOTIFICATION DATE		DELIVERY MODE		
05/15/2009		ELECTRONIC		

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.

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Board of Patent Appeals and Interferences

OBLON, SPIVAK, MCCLELLAND MAIER &  
NEUSTADT, P.C.  
1940 DUKE STREET  
ALEXANDRIA, VA 22314

Appeal No: 2009-3530  
Appellant: Christian Marzolin, David Quere et al.  
Application No: 09/926,367  
Hearing Room: A  
Hearing Docket: A  
Hearing Date: Wednesday, June 10, 2009  
Hearing Time: 01:00 PM  
Location: Madison Building - East Wing  
600 Dulany Street, 9th Floor  
Alexandria, Virginia 22313-1450

NOTICE OF HEARING  
CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquiries, please contact the Clerk of the Board at 571-272-9797.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

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CHECK ONE: ( ) HEARING ATTENDANCE CONFIRMED ( ) HEARING ATTENDANCE WAIVED

Signature of Attorney/Agent/Appellant

Date

Registration No.

Names of other visitors expected to accompany counsel: \_\_\_\_\_

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